PARTNERSHIP AGREEMENT BETWEEN DEPARTMENT OF HEALTH AND THE NORTHERN IRELAND SOCIAL CARE COUNCIL

FEBRUARY 2024

CONTENTS

Introduction	3
1. The Partnership Agreement	3
The Social Care Council Establishment and Purpose	6
2. Statutory Purpose and Strategic Objectives	6
The Social Care Council Governance Arrangements	9
3. Organisational Status	9
4. Governance Framework	9
5. The Social Care Council Board	10
6. Audit and Risk Assurance Committee	12
7. The Social Care Council Chair	13
8. The Social Care Council Chief Executive	14
Role of the [Department]	16
9. Partnership Working with the Social Care Council	16
10.Lead Official	17
11. Annual Engagement Plan	18
12. Departmental Accounting Officer	19
13. Attendance at Public Accounts Committee	20
Assurance Framework	22
14. Autonomy and Proportionality	22
15.Board Effectiveness	23
16.Board Appraisals	24
17. Internal Audit Assurance	24
18. Externally Audited Annual Report and Accounts	25
Signatories	27
Annex 1 - Applicable Legislation	
Annex 2 – Illustrative Annual Engagement Plan	
Annex 3 - Delegations	

Annex 4 – Illustrative System of Assurance	
Annex 5 – Concerns/Complaints in respect of Board members	
Annex 6 - Applicable Guidance	
Annex 7 - Role of the Minister	35
Annex 8 – Information Requests Schedule	36
Annex 9 – Cases Accepted for Investigation by the Northern Ireland Publi	c Service
Ombudsman (NIPSO)	46
Annex 10 - Partnerships between Departments and Arm's Length Bodies	: NI Code of
Good Practice	47

Introduction

1. The Partnership Agreement

- 1.1 This document sets out the partnership arrangements between the Northern Ireland Social Care Council (Social Care Council) and the Department of Health. In particular, it explains the overall governance framework within which the Social Care Council operates, including the framework through which the necessary assurances are provided to stakeholders. Roles/responsibilities of partners within the overall governance framework are also outlined.
- 1.2 The partnership is based on a mutual understanding of strategic aims and objectives; clear accountability; and a recognition of the distinct roles each party contributes. Underpinning the arrangements are the principles set out in the NI Code of Good Practice 'Partnerships between Departments and Arm's-Length Bodies' which should be read in conjunction with this document. The principles which are laid out in the Code are:

LEADERSHIP

Partnerships work well when Departments and Arm's Length Bodies demonstrate good leadership to achieve a shared vision and effective delivery of public services. Strong leadership will provide inspiration, instil confidence and trust and empower their respective teams to deliver good outcomes for citizens.

PURPOSE

Partnerships work well when the purpose, objectives and roles of Arm's Length Bodies and the sponsor department are clear, mutually understood and reviewed on a regular basis. There needs to be absolute clarity about lines of accountability and responsibility between departments and Arm's Length Bodies. In exercising statutory functions Arm's Length Bodies need to have clarity about how their purpose and objectives align with those of departments.

ASSURANCE

Partnerships work well when departments adopt a proportionate approach to assurance, based on Arm's Length Bodies' purpose and a mutual understanding of risk. Arm's Length Bodies should have robust governance arrangements in place and in turn departments should give Arm's Length Bodies the autonomy to deliver effectively. Management information should be what is needed to enable departments and Arm's Length Bodies to provide assurance and assess performance.

VALUE

Partnerships work well when departments and Arm's Length Bodies share knowledge, skills and experience in order to enhance their impact and delivery. Arm's Length Bodies are able to contribute to policy making and departmental priorities. There is a focus on innovation, and on how departments and Arm's Length Bodies work together to deliver the most effective policies and services for its customers.

ENGAGEMENT

Partnerships work well when relationships between departments and Arm's Length Bodies are open, honest, and constructive and based on trust. There is mutual understanding about each other's objectives and clear expectations about the terms of engagement.

A full copy of the NI Code can be found at **Annex 8.**

- 1.3 This document has been produced based on the proportionate autonomy which is currently in place (see DAO (DoF) 06/19) and built up over time through the strong relationship which exists between the Social Care Council and the Department of Health Office Of Social Services.
- 1.4 The Department of Health and the Social Care Council are committed to:
 - Working together within distinct roles and responsibilities;
 - Maintaining focus on successful delivery of Programme for Government outcomes and Ministerial priorities (see also paras 2.6 and 2.7);
 - Maintaining open and honest communication and dialogue;
 - Keeping each other informed of any issues and concerns, and of emerging areas of risk on the basis of no surprises;
 - Supporting and challenging each other on developing policy and delivery [when developing policy this may cut across more than one department];
 - Seeking to resolve issues quickly and constructively; and

- Acting at all times in the public interest and in line with the values of integrity, honesty, objectivity and impartiality.
- 1.5 The effectiveness of the partnership and the associated Engagement Plan will be reviewed each year by the Department of Health and The Social Care Council in order to assess whether the partnership is operating as intended and to identify any emerging issues/opportunities for enhancement. This can be carried out as part of existing governance arrangements. The Partnership Agreement document itself will be reviewed formally at least once every three years to ensure it remains fit for purpose and up-to-date in terms of current governance frameworks.
- 1.6 The formal review will be proportionate to size and overall responsibilities of the Social Care Council and will be published on departmental and The Social Care Council's website as soon as practicable following completion.
- 1.7 A copy of this agreement has been placed in the Assembly Library and is available on the Department of Health and the Social Care Council's websites.

Establishment and Purpose of the Northern Ireland Social Care Council

2. Statutory Purpose and Strategic Objectives

- 2.1 The Social Care Council is a Non-Departmental Public body (ALB) established under Statutory Rule 2001 No 128 (C.5) of the Health and Personal Social Services Act (commencement No. 1) Order (Northern Ireland) 2001 ("the Act). The aim of the Social Care Council is to protect the public through improving safeguards, raising the standards of social care and strengthening the professionalism of the workforce.
- 2.2 In so doing the Council will seek to fully support the DOH in delivering the transformation agenda engaging as appropriate with all key stakeholders including the statutory and independent sector, service users and carers, the registered social work and social care workforce and other regulators.
- 2.3 For the purposes of Whole of Government Accounts the Social Care Council no longer qualifies as a Minor status body classified to the Public Corporations Sector as per circular DCM (DoF) 03/23. The Social Care Council Annual Accounts are consolidated into the DOH Sponsor Body accounts and will form part of the accounts data input to OSCAR II by the department.
- 2.4 The Social Care Council's [statutory] functions, duties and powers includes the duty of the Social Care Council to:
 - Maintain and publish a register of Social Workers, Social Work Students and Social Care Workers in Northern Ireland (over 45,000 registrants)
 - Set rules for application and entry to the register
 - Set and promote high standards for Social Workers, Social Work Students and Social Care Workers for their conduct, training, continuous professional development and practice
 - Protect the public through maintaining robust Fitness to Practice procedures

- Set standards for and regulate social work qualifying and post-qualifying education and training in Northern Ireland
- Develop occupational standards for social work and social care
- Ascertain the training required for social workers and social care workers, promoting and securing delivery, ascertaining the financial assistance required, and where no provision is available providing the necessary training.
- Promote the importance of the Social Work profession and the social care workforce in delivering care services to the public
- Provide leadership across social work and social care to support transformation of services.
- 2.5 The status and constitution of the Council is set out in Schedule 1 to the Act. The Council does not carry out its functions on behalf of the Crown.
- 2.6 The Minister for the Department of Health is answerable to the Assembly for the overall performance and delivery of both the Department and the Social Care Council.
- 2.7 The Executive's outcome-based approach to delivery recognises the importance of arm's length bodies and departments working collaboratively and together in a joined-up approach to improve overall outcomes and results.
- 2.8 To that end there is strategic alignment between the aims, objectives and expected outcomes and results of the Social Care Council and the Department of Health
- 2.9 The strategic aims of the Social Care Council are:

2.9.1 **Deliver Effective Regulation**

We are a fair, robust and enabling regulator with responsibility for the regulation and development of the social work and social care workforce, and the regulation of social work education and training. Effective regulation is empowering for both the public and practitioners. It supports high standards in the care provided, in education, learning and development, and inspires a sense of shared achievement of these standards.

2.9.2 **Develop the Capability of the Workforce**

Through a commitment to partnership and co-production, supported by a culture of continuous learning and development we will ensure the right qualifications and learning and development opportunities are available and accessible to the workforce. We will use our knowledge of the future skills needs of the workforce and how they learn, to shape and define their qualifications, learning and professional development for the future.

2.9.3 Leading with Influence

We enable and empower social workers and social care workers to effectively contribute to the delivery of high-quality services and we will continue to understand the environment within which they work. We will continue to listen to our partnerships with employers, registrants, service users and carers; and build our evidence, using data and intelligence. This will ensure sufficient numbers of the right people, with the right knowledge, skills and values, are supported in a way that reflects the value of their work to the citizens of Northern Ireland.

2.9.4 Innovate and Improve

Innovation and improvement are at the heart of forward thinking, people focussed organisations. Technological and digital advances which support agility in service delivery will inform the Social Care Council's delivery of its business into the future. We are an innovative organisation with a culture that supports inclusion, collaboration and creativity. We strive for excellence and are open to listening to challenge, and from this learning and improving. We invest in developing the capability of our people to enable them to thrive, and invest in our systems to deliver efficient and effective services. We are innovative thinkers who are ambitious, determined and inspired to make our services the best they can be.

The Northern Ireland Social Care Council Governance Arrangements

3. Organisational Status

3.1 The Social Care Council is a legal entity in its own right, employing its own staff and operating at arm's-length from the Department. As a legal entity it must comply with all associated legislation including legislation relating to its employer status.

4. Governance Framework

- 4.1 The Social Care Council has an established Corporate Governance Framework which reflects all relevant good practice guidance. The framework includes the governance structures established within the Social Care Council and the internal control and risk management arrangements in place. This includes its Board and Committee Structure.
- 4.2 An account of this is included in The Social Care Council's annual Governance Statement together with The Social Care Council Board's assessment of its compliance with the extant Corporate Governance Code of Good Practice (NI). Any departure from the Corporate Governance Code must be explained in the Governance Statement. The extant Corporate Governance Code of Good Practice (NI) is available on the DoF website.
- 4.3 The Social Care Council is required to follow the principles, rules, guidance and advice in *Managing Public Money Northern Ireland*. A list of other applicable guidance and instructions which the Social Care Council is required to follow is set out in Annex 6. Good governance should also include positive stakeholder engagement, an embedded co-production approach, the building of positive relationships and a listening and learning culture.

5. The Social Care Council Board

- 5.1 The Social Care Council is led by a Board, non-executive members of which are appointed by the Minister of the Department of Health. The constitution of the Board of the Social Care Council is set out in the Northern Ireland Social Care Council (Appointments and Procedure) Regulations (Northern Ireland) 2001. The appointment process for non-executive Board members complies with the Code of Practice on Public Appointments for Northern Ireland. All Board appointments are set out on the Social Care Council website at www.niscc.info/our-board/.
- 5.2 As Public Appointees Board members are office holders rather than employees and therefore, they are not subject to employee terms and conditions. Board appraisal arrangements are set out in paras 16.1 and 16.2, and matters for consideration in dealing with concerns/complaints in respect of Board members are provided in Annex 5.
- 5.3 The Board's operating framework/terms of reference provides further detail on roles and responsibilities and should align closely with this Partnership Agreement. The Boards Standing Orders are aligned to this partnership agreement and a copy is available on the Social Care Council website at <u>www.niscc.info/our-board/.</u>
- 5.4 The purpose of the Social Care Council Board is to provide effective leadership and strategic direction to the organisation and to ensure that the policies and priorities set by the Minister for the Department of Health are implemented. It is responsible for ensuring that the organisation has effective and proportionate governance arrangements in place and an internal control framework which allow risks to be effectively identified and managed. The Board will set the culture and values of the organisation and set the tone for the organisation's engagement with stakeholders, registrants, service users and carers.
- 5.5 The Social Care Council Board delivers its business through an effective delegation framework which includes a number of subcommittee's and partnerships that serve to inform, assure and hold to account the work of the

Social Care Council and its engagement with key stakeholders including Registrants, Employers, Carers, Service users, Colleges and Universities.

- 5.6 The Board is responsible for holding the Chief Executive to account for the management of the organisation and the delivery of agreed plans and outcomes. The Board should also however support the Chief Executive as appropriate in the exercise of their duties.
- 5.7 Board members act solely in the interests of the Social Care Council and must not use the Board as a platform to champion their own interests or pursue personal agendas. They occupy a position of trust, and their standards of action and behaviour must be exemplary and in line with the seven principles of public life (Nolan principles). The Social Care Council has a Board Code of Conduct and there are mechanisms in place to deal with any Board disputes/conflicts to ensure they do not become wider issues that impact on the effectiveness of the Board. A Board Register of Interests is maintained, kept up to date and is publicly available to help provide transparency and promote public confidence in the Social Care Council.
- 5.8 Communication and relationships within the Board are underpinned by a spirit of trust and professional respect. The Board recognises that ¹to make effective decisions it must maintain a critical approach, judge all available options, thoroughly consider the implications of all decisions, question the validity of the information presented and ensure all decisions are documented sufficiently.
- 5.9 It is for the Board to decide what information it needs, and in what format, for its meetings/effective operation. If the Board is not confident that it is being fully informed about the organisation this will be addressed by the Chair of the Board as the Board cannot be effective with out-of-date or only partial knowledge.

¹ NIAO Board Effectiveness: A Good Practice Guide June 2022 section 4.28

5.10 In order to fulfil their duties, Board members must undertake initial training, and regular ongoing training and development. Review of Board skills and development will be a key part of the annual review of Board effectiveness.

6. Audit and Risk Assurance Committee

- 6.1 A further important aspect of the Social Care Council governance framework is its Audit and Risk Assurance Committee, established in line with the extant Audit and Risk Assurance Committee Handbook (NI).
- 6.2 The Audit and Risk Assurance Committee's purpose/role is to support the Accounting Officer and Board on governance issues. In line with the handbook the Audit and Risk Assurance Committees focuses on a number of things including:
 - assurance arrangements over governance; financial reporting; annual reports and accounts, including the Governance Statement; and
 - ensuring there is an adequate and effective risk management and assurance framework in place.
- 6.3 The Social Care Council and the Department of Health have agreed arrangements in respect of Audit and Risk Assurance Committees which include:
 - attendance by departmental representatives in an observer capacity at the Social Care Council's Audit and Risk Assurance Committee meetings;
 - Access to the Social Care Council Audit and Risk Assurance Committee papers and minutes;
 - Any input required from the Social Care Council's Audit and Risk Assurance Committee to the departmental Audit and Risk Assurance Committee.
 - The Chair of the Social Care Council ARAC will be invited to attend the DOH ARAC Forum.
- 6.4 Full compliance with the Audit and Risk Assurance Committee Handbook (NI) is an essential requirement. In the event of significant non-compliance with the handbook's five good practice principles (or other non-compliance) discussion

will be required with the Department and a full explanation provided in the annual Governance Statement.

6.5 The extant Audit and Risk Assurance Committee Handbook (NI) is available on the DoF website at www.finance-ni.gov.uk/publications/audit-committees.

7. The Social Care Council Chair

- 7.1 The Chair is responsible for setting the agenda and managing the Board to enable collaborative and robust discussion of issues. The Chair's role is to develop and motivate the Board and ensure effective relationships in order that the Board can work collaboratively to reach a consensus on decisions. To achieve this, he or she should ensure:
 - The Board has an appropriate balance of skills appropriate to its business;
 - Board members are fully briefed on terms of appointment, duties, rights and responsibilities;
 - Board members receive and maintain appropriate training;
 - The Minister is advised of the Social Care Council's needs when board vacancies arise;
 - There is a Board Operating Framework in place setting out the roles and responsibilities of the Board in line with relevant guidance;
 - There is a code of practice for Board members in place, consistent with relevant guidance.
- 7.2 The role also requires the establishment of an effective working relationship with the Chief Executive that is simultaneously collaborative and challenging. It is important that the Chair and Chief Executive act in accordance with their distinct roles and responsibilities as laid out in Managing Public Money and their appointment letters.
- 7.3 The Chair has a presence in the organisation and cultivates external relationships which provide useful links for the organisation while being mindful of overstepping boundaries and becoming too involved in day to day operations or executive activities.

8. The Social Care Council Chief Executive

- 8.1 The role of the Social Care Council Chief Executive is to run the Social Care Council business. The Chief Executive is responsible for all executive management matters affecting the organisation and for leadership of the executive management team.
- 8.2 The Chief Executive is designated as the Social Care Council Accounting Officer by the departmental Accounting Officer (see section 12). As Accounting Officer they are responsible for safeguarding the public funds in their charge and ensuring they are applied only to the purposes for which they were voted and more generally for efficient and economical administration.
- 8.3 The Chief Executive is accountable to the Board for the Social Care Council performance and delivery of outcomes and targets and is responsible for implementing the decisions of the Board and its Committees. They maintain a dialogue with the Chair on the important strategic issues facing the organisation and for proposing Board agendas to the Chair to reflect these. They ensure effective communication with stakeholders and communication on this to the Board. They also ensure that the Chair is alerted to forthcoming complex, contentious or sensitive issues, including risks affecting the organisation.
- 8.4 The Chief Executive acts as a role model to other executives by exhibiting open support for the Chair and Board members and the contribution they make. The Chair and Chief Executive have agreed how they will work together in practice, understanding and respecting each other's role, including the Chief Executive's responsibility as Accounting Officer.
- 8.5 Further detail on the role and responsibilities of the Chief Executive are as laid out in Managing Public Money NI and their Accounting Officer appointment letter.

The Chief Executive's role as Principal Officer for Ombudsman Cases

8.6 The Chief Executive is the Principal Officer for handling cases involving the NI Public Sector Ombudsman. They shall advise the Departmental Accounting Officer through their DOH Sponsoring Unit of any complaints about the Social Care Council accepted by the Ombudsman for investigation, and about the proposed response to any subsequent recommendations from the Ombudsman.

Role of the Department of Health

9. Partnership Working with the Social Care Council

- 9.1 The Department of Health and the Social Care Council are part of a total delivery system, within the same Ministerial portfolio. The partnership between the Department of Health and the Social Care Council is open, honest, constructive and based on trust. There is mutual understanding of each other's objectives and clear expectations on the terms of engagement.
- 9.2 In exercising its functions, the Social Care Council has absolute clarity on how its purpose and objectives align with those of the Department of Health. There is also a shared understanding of the risks that may impact on each other, and these are reflected in respective Risk Registers.
- 9.3 There is a regular exchange of information, skills and experience between the Department of Health and the Social Care Council and where possible joint programme/project delivery boards/ arrangements. The Social Care Council may also be involved as a partner in policy/strategy development and provides advice on policy implementation/ the impact of policies in practice.
- 9.4 The Department of Finance (DoF) has established, on behalf of the Assembly, a delegated authority framework which sets out the circumstances where prior DoF approval is required before expenditure can be occurred or commitments entered into. The Accounting Officer of the Department of Health has established an internal framework of delegated authority for the Department and its ALBs which apply to the Social Care Council see <u>HSC(F) 33-2023 Revised HSC & NIFRS</u> <u>Delegated Limits and requirements for Departmental / DoF approval</u>. Other specific approval requirements established in respect of the Social Care Council are set out at Annex 3.
- 9.5 Once the Social Care Council budget has been approved by the Department of Health [and subject to any restrictions imposed by statute/ the Minister / this Partnership Agreement or any other circulars, directives, and best practice

guidance that may issue from, or by way of, the Department] the Social Care Council shall have authority to incur expenditure approved in the budget without further reference to the Department. Inclusion of any planned and approved expenditure in the budget shall not however remove the need to seek formal departmental approval where proposed expenditure is outside the delegated limits (as laid out in Annex 3) or is for new schemes not previously agreed. Nor does it negate the need to follow due processes laid out in guidance contained in Managing Public Money NI and Better Business Cases NI.

10. Lead Official

- 10.1 The Department of Health has appointed the Chief Social Work Officer (G5) as the Lead Official to manage the relationship with the Social Care Council and ensure effective partnership working. This responsibility is supported by the appointment of a Government Liaison Officer (G7) who will have responsibility for the day to day engagement with the Social Care Council and supported in turn by the Office of Social Services administration.
- 10.2 Engagement between the Department and the Social Care Council will be coordinated, collaborative and consistent and move forward on the basis of a partnership arrangement. A clear sense of collaboration and partnership will be communicated to staff in both the Department of Health and the Social Care Council in order to promote mutual understanding and support. This includes wider policy areas beyond that of sponsorship to including Regulation Policy of the social work and social care workforce and Regulatory Policy of Education and Training that is the responsibility of a professional social work officer within the OSS.
- 10.3 The lead official is the overall lead for the oversight of the Social Care Council and its business performance, governance and compliance. They and their supports within OSS will have a clear understanding of the Social Care Council's responsibilities for policy implementation/operational delivery and the relevant audiences/stakeholders involved.

10.4 The lead official will ensure that where there are departmental staff changes, time is taken to ensure they have a full understanding of the Social Care Council business and challenges this includes relevant and appropriate training and development in governance and accountability and sponsorship.

11. Annual Engagement Plan

- 11.1 The Department and the Social Care Council will agree an engagement plan before the start of each business year. The Annual Engagement Plan (Annex 2) will set out the timing and nature of engagement between the Social Care Council and the Department. The engagement plan will be specific to the Social Care Council and should not stray into operational oversight.
- 11.2 Engagement between the Department's lead official/their teams and the Social Care Council will be centred on partnership working, understanding of shared risks which will be identified as part of the business planning each year and reviewed as appropriate. The Department and the Social Care Council will work together on business developments that align with the Department's priorities and agreed policy and strategic objectives aligned with the draft Programme for Government framework.
- 11.3 In line with relevant guidance², the Social Care Council will work in collaboration and partnership with the Department to prepare corporate and annual business plans. There should be good high level strategic alignment between departmental and the Social Care Council plans. Once approved it will be the Board of the Social Care Council that primarily holds the Chief Executive to account for delivery and performance. The Department will engage with the Social Care Council on areas of strategic interest, linking departmental policy and the Social Care Council delivery of policy intent. This may include engagement on wider policy beyond that of the Office of Social Services, as appropriate.

² Guidance issued by TEO on NICS Work Programme which includes guidance on business planning for an outcomes-based PfG/ODP

11.4 The Annual Engagement Plan will also reference the agreed management and financial information to be shared over the course of a year. The aim will be to ensure clear understanding of why information is necessary and how it will be used. Where the same, or similar information is required for internal governance information requirements this will be aligned so that a single report can be used for both purposes. In addition, the engagement plan should consider opportunities for learning and development, growth and actions which could help achieve better outcomes and improvements in communications and engagement processes.

12. Departmental Accounting Officer

- 12.1 The Departmental Accounting Officer is accountable to the NI Assembly for the issue of grant in aid to the Social Care Council. He/she has designated the Chief Executive of the Social Care Council as the organisations Accounting Officer and respective responsibilities of the Departmental Accounting Officer and the Social Care Council Accounting Officer are set out in *Chapter 3 of Managing Public Money Northern Ireland*. The Departmental Accounting Officer may withdraw the Social Care Council Accounting Officer designation if he/she concludes that the Social Care Council Accounting Officer is no longer a fit person to carry out the responsibilities of an Accounting Officer or that it is otherwise in the public interest that the designation be withdrawn.
- 12.2 In such circumstances the Social Care Council Board will be given a full account of the reasons for withdrawal and a chance to make representations. Withdrawal of the Social Care Council Accounting Officer status would bring into question employment as Chief Executive and the Chair should engage with the Department should such circumstances arise.
- 12.3 As outlined in Section 8 of this Agreement, the Social Care Council Chief Executive is accountable to the Social Care Council Board for his/her stewardship of the Social Care Council. This includes advising the Board on matters of financial propriety, regularity, prudent and economical administration, efficiency and effectiveness.

- 12.4 The Departmental Accounting Officer must be informed in the event that the judgement of the Social Care Council Accounting Officer (on matters for which they are responsible) is over-ridden by the Social Care Council Board. The Social Care Council Accounting Officer must also take action if the Social Care Council Board is contemplating a course that would infringe the requirement for financial propriety, regularity, prudent and economical administration, efficiency or effectiveness. In all other regards, the Departmental Accounting Officer has no day to day involvement with the Social Care Council or its Chief Executive.
- 12.5 In line with DoF requirements, the Social Care Council Accounting Officer will provide an annual declaration of fitness to act as Accounting Officer to the departmental Accounting Officer as part of the mid-year assurance statement.

13. Attendance at Public Accounts Committee

- 13.1 The Social Care Council Chief Executive/Accounting Officer may be summoned to appear before the Public Accounts Committee to give evidence on the discharge of their responsibilities as Accounting Officer (as laid out in their Accounting Officer appointment letter) on issues arising from the C&AG's studies or reports following the annual audit of accounts.
- 13.2 The Chair may also, on occasion, be called to give evidence to the Public Accounts Committee on such relevant issues arising within the C&AG's studies or reports, in relation to the role and actions taken by the Board, where appropriate.
- 13.3 In addition, the Department of Health Accounting Officer may be summoned to appear before the Public Accounts Committee to give evidence on the discharge of their responsibilities as departmental Accounting Officer with overarching responsibility for the Social Care Council. In such circumstances, the departmental accounting Officer may therefore expect to be questioned on their responsibilities to ensure that:

- there is a clear strategic control framework for the Social Care Council;
- sufficient and appropriate management and financial controls are in place to safeguard public funds;
- the nominated Accounting Officer is fit to discharge his or her responsibilities;
- there are suitable internal audit arrangements;
- accounts are prepared in accordance with the relevant legislation and any accounting direction; and
- intervention is made, where necessary, in situations where the Social Care Council Accounting Officer's advice on transactions in relation to regularity, propriety or value for money is overruled by the body's Board or its Chair.

Assurance Framework

14. Autonomy and Proportionality

- 14.1 The Department of Health will ensure that the Social Care Council has the autonomy to deliver effectively, recognising its status as a separate legal entity which has its own Board and governance arrangements. Guidance on proportionate autonomy has been considered in determining the extent of engagement and assurance established between the Social Care Council and the Department of Health and is reflected in this agreement.
- 14.2 A proportionate approach to assurance will be taken based on the Social Care Council's overall purpose, business and budget and a mutual understanding of risk. The approach will include an agreed process through which the Social Care Council Accounting Officer provides written assurance to the Department that the public funds and organisational assets for which they are personally responsible are safeguarded, have been managed with propriety and regularity, and use of public funds represents value for money.
- 14.3 Recognising the governance arrangements in place within the organisation, the Social Care Council Accounting Officer will arrange for their written assurance to be discussed at the Social Care Council Audit and Risk Assurance Committee and presented to the Social Care Council Board prior to submission to the Department where possible. If not possible, or practicable, the Chair of the Social Care Council Board should have sight of the assurance statement, prior to being submitted to the Department.
- 14.4 The Social Care Council Chair will provide written confirmation that the Social Care Council Accounting Officer's formal assurance has been considered by the Board and is reflective of the Social Care Council current position.
- 14.5 In addition to the Social Care Council Accounting Officer's written assurance, the Department will take assurance from the following key aspects of the Social Care Council own governance framework:

- Annual Review of Board Effectiveness;
- Timely completion of Board Appraisals which confirm Board member effectiveness;
- Internal Audit assurance and External Quality Assessment of the Internal Audit function;
- Externally audited Annual Report and Accounts, reviewed/considered by the Social Care Council Audit and Risk Assurance Committee.
- Other Independent Assurance Reports such as Investors in People.

15. Board Effectiveness

- 15.1 The Social Care Council Chair will ensure that the Social Care Council Board undertakes an annual review of Board Effectiveness³ which encompasses committees established by the Board.
- 15.2 The Chair will discuss the outcome of the annual review of Board Effectiveness with the Departmental lead official to ensure a partnership approach to any improvements identified. This will inform the annual programme of Board training/development and discussions in respect of Board composition and succession.
- 15.3 In line with any parameters set out in founding (or other) legislation, the Chair in conjunction with the Department, and Ministers where appropriate, will consider the size and composition of the Social Care Council Board, proportionate to the size and complexity of the Social Care Council and keep this under review.
- 15.4 In addition to the annual review of Board Effectiveness the Social Care Council will undertake an externally facilitated review of Board effectiveness at least once every three years covering the performance of the Board, its Committees and individual Board members. The Chair will liaise with the Department to identify a suitably skilled facilitator for the external review (this can be a peer review, and

³ NIAO Good Practice Guide on Board Effectiveness

should be proportionate) and will share the findings/outcome report with the Department on completion of the review.

- **16. Board Appraisals**
- 16.1 The Chair of the Social Care Council will conduct an annual appraisal in respect of each Board member which will also inform the annual programme of Board training/ development. The Chair will engage with the Chief Executive/Departmental lead official as appropriate on improvements identified through the appraisal process and the annual training/development programme.
- 16.2 The Chair's annual appraisal will be completed by the relevant Executive Board Member Sponsor within the Department. The appraisal will take account of the key characteristics of a good chairperson (particularly for the Chair to have well developed interpersonal skills) set out in the NIAO Good Practice Guide on Board Effectiveness available on the NIAO website. There will be close engagement between the Chair and the lead official on improvements identified through the appraisal process.

17. Internal Audit Assurance

- 17.1 The Social Care Council is required to establish and maintain arrangements for an internal audit function that operates in accordance with the Public Sector Internal Audit Standards (PSIAS). The Department of Health must be satisfied with the competence and qualifications of the Head of Internal Audit and that the requirements for approving appointments are in accordance with PSIAS.
- 17.2 NISCC utilise BSO's Internal Audit services. BSO Internal Audit is PSIAS compliant and based on an overarching Service Level Agreement and Memorandum of Understanding with the Department, BSO discharges functions, such as Internal Audit to HSC Trusts, on behalf of DoH.
- 17.3 The Social Care Council will provide its internal audit strategy, periodic audit plans and annual audit report, including the Head of Internal Audit's opinion on

risk management, control and governance to the Department. The Social Care Council will ensure the Department's internal audit team have complete right of access to all relevant records.

- 17.4 The Social Care Council will ensure regular, periodic self-assessments of the internal audit function in line with PSIAS and will share these with the Department. The Social Care Council will also liaise with the Department on the External Quality Assessment (EQA) of the internal audit function which (in line with PSIAS) is required to be conducted at least once every five years by a qualified independent assessor.
- 17.5 The Social Care Council will alert the Department to any less than satisfactory audit reports at the earliest opportunity on an ongoing basis. The Social Care Council will also alert the Department to a less than satisfactory annual opinion from the Head of Internal Audit at the earliest opportunity. The Social Care Council and the Department will then engage closely on actions required to address the less than satisfactory opinion in order to move the Social Care Council to a satisfactory position as soon as possible.
- 17.6 The Department will take assurance from the fact that the Social Care Council has met the requirements of PSIAS and has a satisfactory annual opinion from the Head of Internal Audit as part of its overall assurance assessment.

18. Externally Audited Annual Report and Accounts

- 18.1 The Social Care Council is required to prepare an Annual Report and Accounts in line with the Government Financial Reporting Manual (FReM) issued by the Department of Finance (DoF) and the specific Accounts Direction issued by the Department of Health and in accordance with the deadlines specified.
- 18.2 The Comptroller & Auditor General (C&AG) will arrange to audit the Social Care Council's annual accounts and will issue an independent opinion on the accounts. The C&AG lays them before the NI Assembly, together with the Social Care Council's annual report.

- 18.3 The C&AG will also provide a Report to Those Charged with Governance (RTTCWG) to the Social Care Council which will be shared with the Department.
- 18.4 The Social Care Council will alert the Department to any likely qualification of the accounts at the earliest opportunity. In the event of a qualified audit opinion or significant issues reported in the RTTCWG the Department will engage with the Social Care Council on actions required to address the qualification/significant issues.
- 18.5 The Department will take assurance from the external audit process and an unqualified position as part of its overall assurance assessment.
- 18.6 The C&AG may carry out examinations into the economy, efficiency and effectiveness with which the Social Care Council has used its resources in discharging its functions. The C&AG may also carry out thematic examinations that encompass the functions of the Social Care Council.
- 18.7 For the purpose of audit and any other examinations, the C&AG has statutory access to documents as provided for under Articles 3 and 4 of the Audit and Accountability (Northern Ireland) Order 2003.
- 18.8 Where making payment of a grant, or drawing up a contract, the Social Care Council should ensure that it includes a clause which makes the grant or contract conditional upon the recipient or contractor providing access to the C&AG in relation to documents relevant to the transaction. Where subcontractors are likely to be involved, it should also be made clear that the requirements extend to them.

Signatories

The Social Care Council and the Department of Health agree to work in partnership with each other in line with the NI Code of Good Practice '*Partnerships between Departments and Arm's-Length Bodies*' and the arrangements set out in this Agreement.

DoF Supply will approve the initial Partnership Agreement between the Social Care Council and the Department of Health and any subsequent variations to the Agreement, if they are significant.

This agreement will be reviewed annually.

Martin

Signed (The Social Care Council Chair) Date 21 February 2024

Patricia Itragino

Signed (The Social Care Council Chief Executive) Date 21 February 2024

Signed (Department) Peter May, Permanent Secretary

Kelen hay

Date: 7 March 2024

Date Annex 1 - Applicable Legislation

List the founding legislation and other key statutes which provide the Social Care Council with its statutory functions, duties and powers.

Legislation

The legislation under which the Northern Ireland Social Care Council has been established is: <u>Health and Personal Social Services Act (Northern Ireland) 2001</u> (legislation.gov.uk)

Regulations

The following Statutory Regulations govern the work of the Northern Ireland Social

Care Council:

- The Health and Personal Social Services (2001 Act) (Commencement No. 2) Order (Northern Ireland) 2001 <u>The Health and Personal Social Services (2001</u> <u>Act) (Commencement No. 2) Order (Northern Ireland) 2001</u> (legislation.gov.uk)
- 2. The Northern Ireland Social Care Council (Appointments and Procedure) Regulations (Northern Ireland) 2001 <u>The Northern Ireland Social Care Council</u> (Appointments and Procedure) Regulations (Northern Ireland) 2001 (legislation.gov.uk)
- 3. The Northern Ireland Social Care Council (Appointments and Procedure) (Amendment) Regulations (Northern Ireland) 2002 <u>The Northern Ireland</u> <u>Social Care Council (Appointments and Procedure) (Amendment) Regulations</u> (Northern Ireland) 2002 (legislation.gov.uk)
- The Northern Ireland Social Care Council (Description of Social Care Workers) Order (Northern Ireland) 2003 <u>The Northern Ireland Social Care</u> <u>Council (Description of Social Care Workers) Order (Northern Ireland) 2003</u> (legislation.gov.uk)
- The Health and Personal Social Services (2001 Act) (Commencement No 5) Order (Northern Ireland) 2003 <u>The Health and Personal Social Services (2001</u> <u>Act) (Commencement No. 5) Order (Northern Ireland) 2003</u> (legislation.gov.uk)
- 6. The Northern Ireland Social Care Council (Description of Social Care Workers) Order (Northern Ireland) 2004 <u>The Northern Ireland Social Care</u>

<u>Council (Description of social care workers) Order (Northern Ireland) 2004</u> (legislation.gov.uk)

- The Northern Ireland Social Care Council (Description of Social Care Workers) Order (Northern Ireland) 2004 <u>The Northern Ireland Social Care</u> <u>Council (Description of social care workers) Order (Northern Ireland) 2004</u> (legislation.gov.uk)
- 8. The Registration of Social Care Workers (Relevant Registers) Regulations (Northern Ireland) 2005 <u>The Registration of Social Care Workers (Relevant</u> <u>Registers) Regulations (Northern Ireland) 2005 (legislation.gov.uk)</u>
- The Health and Personal Social Services (2001 Act) (Commencement No. 7) Order (Northern Ireland) 2005 <u>The Health and Personal Social Services (2001</u> Act) (Commencement No. 7) Order (Northern Ireland) 2005 (legislation.gov.uk)
- 10. The Northern Ireland Social Care Council (Description of Social Care Workers) Order (Northern Ireland) 2006 <u>The Northern Ireland Social Care</u> <u>Council (Description of Social Care Workers) Order (Northern Ireland) 2006</u> <u>(legislation.gov.uk)</u>
- 11. The Northern Ireland Social Care Council (Social Care Workers Prohibition) and Fitness of Workers Regulations (Northern Ireland) 2013 <u>The Northern</u> <u>Ireland Social Care Council (Social Care Workers Prohibition) and Fitness of</u> <u>Workers Regulations (Northern Ireland) 2013 (legislation.gov.uk)</u>
- 12. The Northern Ireland Social Care Council (Social Care Workers Prohibition) and Fitness of Workers (Amendment) Regulations (Northern Ireland) 2017 <u>The Northern Ireland Social Care Council (Social Care Workers Prohibition)</u> <u>and Fitness of Workers (Amendment) Regulations (Northern Ireland) 2017</u> <u>(legislation.gov.uk)</u>
- 13. The Northern Ireland Social Care Council (Appointments and Procedure) (Amendment) Regulations (Northern Ireland) 2018 <u>The Northern Ireland</u> <u>Social Care Council (Appointments and Procedure) (Amendment) Regulations</u> (Northern Ireland) 2018 (legislation.gov.uk)

Annex 2 – Annual Engagement Plan

Good engagement is one of the key principles in the Partnership Code, underpinning the other principles of: Leadership; Purpose; Assurance; and Value.

As laid out in the Code, partnerships work well when relationships between departments and ALBs are open, transparent, honest, constructive and based on trust and when there is mutual understanding of each other's objectives and clear expectations about the terms of engagement.

How we work together

To achieve our joint purpose, we are committed to building and sustaining effective relationships with each other as sponsor and ALB. Strong relationships are fundamental to the efficient and effective delivery of sponsor and ALB partnership working. This supports a long history of working collaboratively with each other, and a positive culture of supportive engagement, a spirit of sharing and ensuring there are no surprises.

Both partners place great value on the strong relationship they have with each other and recognises the vital role they play for each other. It is not possible for the Social Care Council to fulfil its strategic objectives without closely partnering with its sponsor, the Department of Health.

All engagement activities are guided by approaching engagement in a manner that is:

- □ Responsive.
- □ Collaborative.
- □ Accountable.
- □ Future focused.
- Innovative.
- □ Leading with Influence.

The following engagement plan reflects the Partnership Agreement, culture of partnership working, shared leadership and responsibility for a successful reciprocal relationship,

Eng	Engagement Plan 2023/24		
Policy Development and	d Delivery		
Add details of the planned			
Department in relation to areas of policy.	development and mor	nitoring of existing and new	
Policy Area	Frequency/Timing	Lead Departmental/ALB	
	i requency, rinning	Officials	
Adult Social Care Reform	Monthly	Social Care Council Senior Management Team, OSS Representative SSPG	
Social Care Collaborative Forum	Monthly	Chief Executive, Deputy Permanent Secretary for SSPG & Chief Social Worker	
Social Work Leadership Strategy	Ongoing	NISCC Senior Management Team and OSS	
Registration of the Workforce	Quarterly	Director of Registration & Corporate Services (DORCS) and OSS	
Social Work Workforce Reform	Monthly	NISCC Senior Management Team and OSS	
Social Care Workforce Reform	Monthly	NISCC Senior Management Team and OSS	
Strategic Planning			
Activity	Date	Lead Departmental/ALB Official	
ALB Strategic Planning Workshops – encompassing strategic planning and risk identification. Informed	September 2024 and October 2024	Government Liaison Officer (GLO) and NISCC Director of Registration &	

by input on departmental priorities/plans and risk areas		Corporate Services DORCS
Engagement on the draft Business Plan and identification of areas of strategic interest to the Department to inform further scheduled engagement during the year	December 2023 and January 2024	GLO and DORCS
Submission/presentation of the ALB Business Plan	February 2024	GLO and DORCS
Approval of the ALB Business Plan	March 2024	Chief Social Work Officer and Chief Executive
Engagement on areas of strategic interest iro the ALB Business Plan, corporate governance, performance and service delivery during the year	Ground Clearing Meetings every 6 months	OSS Team and Senior Leadership Team (SCC)
Joint Working		
Add details of any interchange opportunities, and/or joint programme/project delivery boards		
Activity	Frequency/Timing	Lead Departmental/ALB Official
Social Work Implementation Board – Data and Intelligence Workstream	Quarterly	DORCS and OSS Representative
Co - Chairing of Adult Social Care Collaborative Forum	Monthly	Social Care Council Chief Executive & Deputy Secretary of SSPG
Co-chairing of adult social care workforce workstream and children's social care	Monthly	Chief Social Work Officer, Director of Regulation & Standards and Head of Workforce Development

Board Appointments

Add details of any engagement related to Public Appointment exercises

Activity	Date	Lead Departmental/ALB Official
Public Appointments, new appointments, reappointment, or extension activity	As required	DoH Head of Public Appointments GLO and Chair
Succession Planning	Annually	DoH Head of Public Appointments GLO and Chair
Completion of Skills Audits for Non- Executive Directors	As required	DoH Head of Public Appointments GLO and Chair
Completion of Skills Audits for Non- Executive Director Chairs	As required	DoH Head of Public Appointments GLO and CEO and outgoing Chair

Chief Executive Recruitment

Add details of any engagement related to the recruitment of a new Chief Executive (if anticipated during the year ahead). ALBs should engage with the Department at an early stage in the event of the recruitment of a new Chief Executive. While recognising the role of the Board as employer, the Department will work closely with the ALB in the recruitment and selection process in line with extant guidance.

Activity	Date	Lead Departmental/ALB Official
Approval to recruit to posts in Senior Executive grades (including Chief Executive)	In advance of proposed recruitment	GLO and Chair/ CEO as applicable DoH Director of Workforce Policy
Chief Executive acknowledges, in writing, receipt of a formal letter of designation as Accounting Officer	As required	NISCC Chief Executive GLO

defining the role and responsibilities of this position		
Assurances		
		ey assurance sources and
any other assurance relat		
Action	Date	Lead Departmental/ALB Official
Outcome of the Review of Board Effectiveness	Annual review with an externally facilitated review at least once every three years	GLO and Chair/CEO
Planning for the externally facilitated review of Board Effectiveness	Externally facilitated review at least once every three years	GLO and DORCS
Board Appraisals and planned training/development for Board members	Following the end of the Business year.	Chair DoH Director of Public Appointments
Chair Appraisal	Following the end of the Business year. After Board Appraisals have been completed by the Chair and the annual Review of Board Effectiveness has concluded	Chair and Minister DoH Perm Sec DoH Director of Public Appointments
Departmental Attendance at ARAC	Attendance as observer once per annum as a minimum. Last attended June 2023	GLO and DORCS
Assurance Statement	Bi annual mid-and end-year	GLO and DORCS

Draft Governance	April	CEO
Statement		Chief Social Work Officer
		Deputy Secretary
		Head of ALB Governance Team
Annual Report and	Мау	CEO
Accounts		DoH Director of Finance
Report to those Charged with Governance	September	CEO
Engagement on other	As applicable	CEO
planned NIAO reports		GLO and DORCS
Head of Internal Audit Annual Report/Opinion	October and June	CEO
Internal Audit Strategy and Plans	February	CEO
Internal Audit External Quality Assessment	To be conducted at least once every five years Last completed May 2020	CEO and DORCS
Ground-Clearing	Mid- and end-year	Relative EBM
Meetings		CEO and Directors
Accountability Meetings	Mid- and end-year	Perm Sec/ relevant EBM
		CEO and Chair
Internal Audit reports	Once - for	CEO
with less than satisfactory assurance	consideration/ comment/ approval (where noted)	GLO/CSWO
Fraud Return	Annually - for	CEO
	consideration/ comment/ approval	GLO
	(where noted)	DoH Director of Finance
Annual Report, with the	Annually – for	CEO
draft submitted to the Department two weeks before the publication date (<i>detailed timetable</i>	information	DoH Director of Finance

for the original second		۱ ۱
for the annual accounts,		
SIC etc is set by Finance Directorate		
		252
Anti-Fraud Policy	Once, and then	CEO
	when revised - for information	DoH Director of Finance
		GLO
Assurance Framework	Annually – for	CEO
	information	GLO
Audit Committee papers	In line with meeting	ARAC Chair / NISCC
(including draft minutes)	schedule – for	Chair
for each meeting as and	information	GLO/ OSS
when issued to		
Committee members)		
Audit Committee Terms	Once, and then	CEO
	when revised - for information	GLO
Audit Strategy	Once, and then when revised - for information	CEO
		GLO
Board meeting papers	Quarterly – for	CEO
(including draft minutes)	information	GLO
for each meeting as and		010
when issued to		
members)		
Business Continuity plan	Annually - For	CEO
	information	GLO
Code of Conduct for	Once, and then	CEO
board members	when revised - for information	GLO
Code of Practice for	Once, and then	CEO
staff	when revised - for information	GLO
Complaints procedure	Once, and then	CEO
	when revised - for information	
		GLO
Corporate Plan	Annually - for	CEO
(including the Business	5	
Plan), must be produced	comment/ approval	
	(where noted)	

for Departmental approval		
Corporate Risk Register	Annually - for consideration/ comment/ approval (where noted)??	CEO GLO
Equality scheme	Once, and then when revised - for information	CEO GLO
Fraud Response Plan	Once, and then when revised - for information	CEO GLO DoH Director of Finance
Grievance and Disciplinary procedures	Once, and then when revised - for information	CEO GLO
Head of Internal Audit's end-of-year and mid- year opinions on risk management, control and governance	Annually, - for consideration/ comment/ approval (where noted)	CEO GLO
Internal Audit Progress Report and work Plan	Annually - for consideration/ comment/ approval (where noted)	CEO GLO
Mid-year Assurance Statement (by end- October each year)	Annually - for consideration/ comment/ approval (where noted)	CEO GLO/CWSO
NIAO management letters	Once - for consideration/ comment/ approval (where noted)	CEO GLO
Register of board members' interests	Annually – for information	CEO GLO
Report on quarterly assessment of progress being made in the delivery of the Corporate/Business	Quarterly - for consideration/ comment/ approval (where noted)	CEO GLO

Plan's aims and objectives		
Whistle-blowing	Once, and then	CEO
procedures/policy	when revised - for information	GLO
Budget Management		
Add details of the informa	tion and returns to be	provided.
Item and Purpose	Date	Lead Departmental/ALB Official
Engagement on Budget Requirements and Forecast Expenditure for the Financial Year	March	Director of Registration & Corporate Services (DORCS)/ DOH Director of Finance and Government Liaison Officer (GLO)
Departmental Approval of the Annual Budget		Director of Registration & Corporate Services (DORCS)/ DOH Director of Finance and Government Liaison Officer (GLO)
Monthly Financial	Monthly	DORCS)
Management Returns		DOH Director of Finance and GLO
Monthly Cash Forecast	Monthly	DORCS
		DOH Director of Finance and GLO
Monitoring Round	As required	DORCS
Returns		DOH Director of Finance and GLO
Provisional Outturn	Annually / as	DORCS
	required	DOH Director of Finance and GLO
Final Outturn	Annually / as	DORCS
	required	DOH Director of Finance and GLO
DoF Commissioned	June, October, and	DORCS
Monitoring Rounds	January (work commences the previous month)	DoH Head of Financial Management Unit

Business cases outside	Ad hoc	GLO
delegated limits or falling within the definition of Novel,		DORCS
Contentious or repercussive		DoH Head of Finance Policy and Accountability Unit
Write off outside	Ad hoc	GLO
delegated limits or which could be considered Novel, Contentious or		DORCS
repercussive		DoH Head of Finance
Clinical negligence claims, EL/OL Claims outside delegated limits or which could be		Policy and Accountability Unit
considered novel,		
contentious or		
repercussive		DODOO
Test Drilling samples	Interim - November and Final – March	DORCS
		GLO
		DoH Head of Finance Policy and Accountability Unit
FAU circulars and	Year – End	DORCS
memos in relation to Year – End Accounts	(March)	GLO
production		DoH Head of Financial Accounting Unit
Circulars – FD letters	Ad hoc	DORCS
		GLO
		DoH Head of Finance Policy and Accountability Unit / DoH Head of Financial Accounting Unit
Capital Spend Returns	Monthly	DORCS
		GLO
		DoH Head of Capital Resources Unit

Capital Resource Limits	Ad hoc	DORCS
(CRL) Returns	Autioc	
		GLO
		DoH Head of Capital Resources Unit
	D	
Disposals	Bi-annually	DORCS
		GLO
		DoH Head of Capital
		Resources Unit
General Capital Outturn	Annually	DORCS
		GLO
		DoH Head of Capital
		Resources Unit
Capital Budget	Ad hoc	DORCS
Exercises/10 Year Plan		GLO
		DoH Head of Capital
		Resources Unit
Other		
Tailor as required to refle	ect the specific require	ments
Item and Purpose	Submission Date	Lead Departmental/ALB
		Official
Accounting Officer -	Annual request	CEO and OSS
Fitness to Act as	from the	
Accounting Officer	departmental	
	Accounting Officer	
Fraud Reporting	Immediate	DORCS
	reporting of all frauds (proven or	GLO
	suspected	
	including	DoH Director of Finance

	DoF on fraud and theft suffered by Social Care Council	DoH Director of Finance	
Media management protocols – independence of ALB to engage with media/announcements of corporate and policy communications significant to ALB - arrangements to share press releases where relevant – ensure no surprises.	As required	Communications and Engagement Manager and GLO	
Preparation of business cases – departments and ALBs to consider working together to share expertise where appropriate.	As required	DORCS GLO	
Whistleblowing Cases/ Speaking Up/Raising Concerns.	As required	DORCS, GLO and Head of Corporate Governance Unit	
NI Public Sector Ombudsman Complaints	As required	DORCS, GLO and Head of Corporate Governance Unit	
Review of the Partnership Arrangement			
Tailor as required to reflect the specific requirements			
Item and Purpose	Date	Lead Departmental/ALB Official	
Light touch review of the Partnership Agreement	Schedule following the end of the Business Year	DORCS and GLO and Head of ALB Governance Team	
Formal review of the Partnership Agreement	To be conducted once every three years	DoH Perm Sec Relevant EBM CEO and Chair	

Annex 3 - Delegations

Delegated authorities

The Social Care Council shall obtain the Department's prior written approval before:

- entering into any undertaking to incur any expenditure that falls outside the delegations or which is not provided for in the Social Care Council's annual budget as approved by the Department;
- incurring expenditure for any purpose that is or might be considered novel or contentious, or which has or could have significant future cost implications;
- making any significant change in the scale of operation or funding of any initiative or particular scheme previously approved by the Department;
- making any change of policy or practice which has wider financial implications that might prove repercussive or which might significantly affect the future level of resources required; or
- carrying out policies that go against the principles, rules, guidance and advice in Managing Public Money, Northern Ireland.

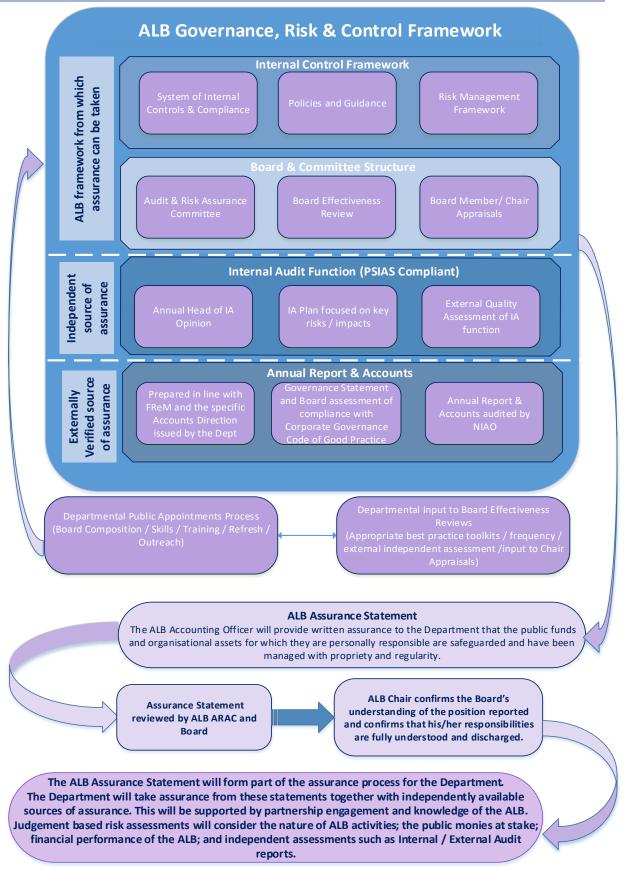
The Social Care Council's Specific Delegated Authorities

These are some of the key delegations of authority specific to the Social Care Council and may be updated, reviewed and added to over time.

- The Social Care Council will comply with existing Delegated Financial authority circulars which are reviewed on an annual basis.
- The Social Care Council will maintain its staffing threshold at 65 whole time equivalents and any increase must be approved by DOH OSS.
- The Social Care Council will disburse the annual disbursement funding on behalf of the DOH and ensure the funding is utilised in line with the agreed activities.

These delegations shall not be altered without the prior agreement of the Department and, where applicable, DoF.

Annex 4 – System of Assurance



Annex 5 – Concerns/Complaints in respect of Board members

In line with the NI Code of Good Practice and the arrangements in this Partnership Agreement, the approach to concerns/complaints raised in respect of the Social Care Council Board members should be transparent and collaborative. The principle of early and open engagement is important, with the Department made aware of any concerns/complaints as soon as practicable.

While Board Members are public appointees/office holders rather than the Social Care Council employees, a Social Care Council employee may utilise the Social Care Council Grievance Procedure/other HR procedure to raise a complaint against a Board member. The Social Care Council employee raising the grievance should expect this to be handled in line with the Social Care Council HR procedures.

Concerns/complaints might also be raised through:

- Raising Concerns/Whistleblowing Arrangements;
- Complaints processes;
- Directly with the Chief Executive of Social Care Council or the Department.

Where a concern/complaint is received within the Social Care Council in respect of an individual Board Member, this should be provided to the Social Care Council Chair who should notify the Department at the outset in order that lead responsibility for handling the complaint/concern is clear in advance.

Where a concern/complaint relates to the Social Care Council Chair, the organisation should notify the Department at the outset for the Department to determine the approach to handling the complaint/concern.

Differences of view in relation to matters which fall within the Board's responsibilities are a matter for the Board to resolve in the best interests of the Social Care Council

A concern/complaint may be raised by a Board Member about a fellow Board Member or a senior member of the Social Care Council staff. The Social Care Council Chair should notify the Department at the outset to ensure that arrangements for handling the concern/complaint are clear. The Department may determine that it should make arrangements to deal with the concern/complaint. This will be agreed at the outset.

Arrangements for concerns/complaints in respect of Board members are reflected in all relevant procedures, including Standing Orders and Board Operating Frameworks.

Annex 6 - Applicable Guidance

The following guidance is applicable to the Social Care Council

Guidance issued by the Department of Finance

- Managing Public Money NI
- Public Bodies A Guide for NI Departments
- Corporate Governance in Central Government Departments Code of Good Practice
- DoF Risk Management Framework
- HMT Orange Book
- The Audit and Risk Assurance Committee Handbook
- Public Sector Internal Audit Standards
- Accounting Officer Handbook HMT Regularity, Propriety and Value for Money
- Better Business Cases NI
- Dear Accounting Officer Letters
- Dear Finance Director Letters
- Dear Consolidation Officer and Dear Consolidation Manager Letters
- The Consolidation Officer Letter of Appointment
- Government Financial Reporting Manual (FReM)
- Guidance for Preparation and Publication of Annual Report and Accounts
- Procurement Guidance

Other Guidance and Best Practice

- Specific guidance issued by the Department
- Impact of EU Exit and Service Delivery
- Recommendations made by the NI Audit Office/NI Assembly Public Accounts Committee
- NIAO Good Practice Guides
- Guidance issued by the Executive's Asset Management Unit
- NI Public Services Ombudsman guidance

Annex 7 – Role of the Minister of Health

Role of the Minister

The Chair of the Social Care Council is responsible to the Minister. Communication between the Board and the Minister should normally be through the Chair.

The Departmental Accounting Officer is responsible for advising the relevant Minister on a number of issues including the Social Care Council objectives and targets, budgets and performance.

In addition to being answerable to the Assembly as laid out in paragraph 2.4, the Minister is also responsible for:

- Setting the strategic direction and overall policies and priorities for the Social Care Council as reflected in the PfG;
- Approving the Social Care Council Business Plan;
- Setting the Social Care Council budget; and
- Appointment of non-executive Board members. The Minister may also be involved in considering the size and composition of the Social Care Council Board – see para 15.3.

Annex 8– Cases Accepted for Investigation by the Northern Ireland Public Service Ombudsman (NIPSO)

Reporting Template

In accordance with Partnership Agreement requirements, anonymised detail on;

- 1. cases accepted by NIPSO; and
- 2. the agreed response to recommendations following completion of any NIPSO investigation,

must be notified to your DoH Sponsor Team lead.

The following template should be used to notify both at initial and final stage of the

investigation and submitted by email to the Sponsor Branch.

(ALB NAME - NOTIFICATION OF ACCEPTED NIPSO CASE			
Unique	Date & number	Date of published	Summary of actions to
Identifier	of areas	decision &	address
	accepted for	number of	recommendations
	Investigation	areas	
		substantiated	

Annex 9 – Partnerships between Departments and Arm's Length Bodies: NI Code of Good Practice

NI Code of Good Practice

NI Code of Good Practice v3 (300323).pdf (finance-ni.gov.uk)